Available online at www.sciencedirect.com
ScienceDirect
Journal of Forensic and Legal Medicine 14 (2007) 119
JOURNAL OF FORENSIC AND LEGAL MEDICINE
www.elsevier.com/jflm

Alcimedes

Changing patterns of drug and alcohol use in fatally injured drivers in Washington State have been reported in the *Journal of Forensic Sciences* (2006; 51: 5: 1191–1198). The study compared the patterns of drug and alcohol use in those who died within 4 h of a traffic accident between 2001 and 2002 and nine years previously. The data revealed that over the past decade while alcohol use has declined, some drug use has increased significantly. Combined drug and alcohol use is a very significant pattern and is probably overlooked by police forces. Blood is recommended as the specimen of choice in serious traffic investigation cases. The paper reminds us that inferring the specific degree of intoxication based on the mere presence of a drug in a person's system is fraught with difficulties due to post-mortem changes, acute and chronic tolerance to drug effects, the time interval between the collision and death or autopsy and patterns of combined drug and alcohol use which have not been specifically studied.

On the subject of impaired driving the stimulant effects of 3,4-methylene dioxymethamphetamine (MDMA) 75 mg and methylphenidate on actual driving during intoxication and withdrawal have recently been reported (*Addiction* 2006; 101: 1614–1621). Eighteen recreational MDMA users participated in a double-blind, placebo-controlled, three way cross-over study performing on-the-road driving tests consisting of a road tracking test and a car following test. MDMA and methylphenidate significantly decreased standard deviation of lateral position (SDLP) in the road tracking tests in the intoxication phase. In addition, MDMA intoxication decreased performance in the car following test as indicated by a significant rise in the 'overshoot' of the subjects' response to speed deceleration of the leading vehicle. Collectively the data indicate that MDMA may improve certain aspects of the driving tasks, such as road tracking performance but may reduce performance in other aspects of the driving task, such as accuracy of speed adaptation during car-following performance.

Alcimedes thoroughly enjoyed reading Khaled Hosseini's debut novel, *The Kite Runner*, which chronicles a country's political turmoil while also developing the characters of two men, who as children spent idyllic days running kites in their native Afghanistan. A case report from nearby India (*For Sci Int* 2006; 163: 141–3) highlights one potential danger of kite flying. The case involved a 25-year old male who was electrocuted when trying to catch a cut down kite which had got caught on an overhead power line. Unfortunately, copper wire had been used as the string of the kite and proved to be a lethal conductor.

An unusual case of a drug-facilitated sexual assault, which led to the tragic death of the young rape victim and then to the suicide of the rapist, was of interest for two different reasons (*Int J Legal Med* 2006; 120: 241–45). After a 13-year old girl was found dead in her bed a detailed autopsy found no injuries that could explain her death. However, detailed toxicological analysis of body fluids revealed high levels of chloroform, and tests on the rapist proved that he had recently been handling the solvent. The case draws attention to the need for broad searches for volatile substances when drug-facilitated sexual assault is suspected. The second interesting feature of the case was that at autopsy there were no signs of violence noted at all. However, vaginal swabs revealed semen later identified as that of the suspected rapist by DNA analysis. This is another demonstration that it is perfectly possible for there to be peno-vaginal penetration of post-pubertal women without damage to the hymen.

The management of an agitated, abusive or violent patient is a common and challenging problem in emergency medicine as well as clinical forensic medicine and forensic physicians can learn much from their emergency physician colleagues. A review in the *Journal of Emergency Medicine* (2006; 31: 317–24) identifies management priorities as ensuring the safety of both the patient and staff (which may include provision of physical restraint of the patient) and evaluation for correctable medical causes of such behavior. If medication is required, oral administration is preferred to an intramuscular injection as the evidence suggests that oral treatments are as well tolerated and effective as parenteral treatments of acute agitation.

---

doi:10.1016/j.jflm.2006.11.001